

II

CLAIMS ONLY								Application Number <b>10/069983</b>		Filing Date	
								Applicant(s)			
* May be used for additional claims or amendments											
CLAIMS	<del>AS FILED</del>		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
101											
102											
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196											
197											
198											
199											
200											
Total											
Indep	3										
Total											
Depend	48										
Total											
Claims	51										

# CLAIMS ONLY

Application Number

101669983

Filing Date

Applicant(s)

CLAIMS	<del>ORIGINAL</del>		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend						
1							61					
2							62					
3							63					
4							64					
5							65					
6							66					
7							67					
8							68					
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37							97					
38							98					
39							99					
40							100					
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49												
50												
Total							Total					
Indep							Indep					
Depend							Depend					
Total							Total					
Claims							Claims					